

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

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CITY GLERK'S OFFICE

| | ago iypo o | pint ni nik. | | | | | | | MILLY DAUGHTINE |
|--|------------------------|---|----------------------|------------|------------------|-----------------------------------|---|---------------|---------------------------------------|
| NA | ME OF FILER | KDEY NE | EV (F | Andra | ea | | (MIDDLE) | nez | = |
| 1. | Office, A | gency, or Cour | t | | | | | | |
| | | me (Do not use acro Department, Dis | PEIRC | gure | / | Your Position | ninstat | ive | Analyst |
| | ► If filing t | ► If filing for multiple positions, list below or on an attachment. (Do not use acronyms) | | | | | | | - |
| | Agency: _ | | | | | Position: | | | |
| 2. | Jurisdio | tion of Office (| Check at least one l | ox) | | | | | |
| | State | | | | | Judge, Retired (Statewide Juri | Judge, Pro Tem Jud sdiction) | dge, or Co | ourt Commissioner |
| | Multi-Co | ounty | | | | County of | | | |
| | City of | EIK GV | ove | | | Other | | | |
| 3. | Type of | Statement (Che | ck at least one box) | | | | | | |
| | | al: The period covered December 31, 202 | | through | | Leaving Office | ce: Date Left (Check one | | |
| | -0 | The period covered December 31, 202 | ed is//_ 21. | , th | rough | or- leaving off | īce. | | through the date of |
| | Assum | ning Office: Date as | sumed/ | <i>J</i> | | ☐ The period | d covered is/ f leaving office. | l <u></u> l | , through |
| | Candi | date: Date of Electio | n | and office | sought, if diffe | rent than Part 1: | | | |
| 4. Schedule Summary (must complete) ► Total number of pages including this cover page: | | | | | | | | | |
| | Schedu | Schedules attached | | | | | | | |
| | | nedule A-1 - Investme | | | = | | Loans, & Business - Gifts - schedule a | | schedule attached |
| | | nedule A-2 - Investme nedule B - Real Prope | | | = | | Gifts – Scriedule & Gifts – Travel Pay | | schedule attached |
| | . / | · | | | | | | | |
| -or- No reportable interests on any schedule | | | | | | | | | |
| J. | Verificat MAILING ADD | DRESS STR | | (| CITY | | STATE | Z | IP CODE |
| | (Business or | Agency Address Recommen | Pollms | May | erkar | we. | CA | 9 | 5758 |
| | DAYTIME TE | LEPHONE NUMBER | 2256 | • • • • | EMAK | ADDRESS LOCY WLV | @ elkgri | we cit | y. Per |
| | I have used | have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information of the best of | | | | | | | |
| | | certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. | | | | | | | |
| | Date Signe | | 22 th, day, year) | | Signatu | re Aprile the | originally signed paper state | ment with you | r filing official.) |